

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000347001

**Entity Name:** 3 DOODLES COLLECTABLES

**Current Principal Place of Business:**

8569 TRIUMPH CIRCLE  
WILDWOOD, FL 34785

**Current Mailing Address:**

8569 TRIUMPH CIRCLE  
WILDWOOD, FL 34785

**FEI Number:** 88-3639339

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MARTINEZ, MOSES  
8569 TRIUMPH CIRCLE  
WILDWOOD, FL 34785 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title	AMBR	Title	AMBR
Name	MARTINEZ, MOSES	Name	MARTINEZ, NICOLETTE C
Address	8569 TRIUMPH CIRCLE	Address	8569 TRIUMPH CIRCLE
City-State-Zip:	WILDWOOD FL 34785	City-State-Zip:	WILDWOOD FL 34785

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MOSES MARTINEZ

AMBR

02/19/2023

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date